

02 **DEPARTMENT OF PROFESSIONAL AND FINANCIAL REGULATION**

313 **BOARD OF DENTAL PRACTICE**

Chapter 2: **QUALIFICATIONS FOR DENTAL HYGIENIST LICENSURE AND DENTAL
HYGIENIST PRACTICE AUTHORITIES**

SUMMARY: This chapter sets forth the qualifications for initial licensure as a dental hygienist and qualifications for dental hygiene practice authorities.

I. GENERAL QUALIFICATIONS; APPLICATION; FEES

- A. An applicant seeking licensure or authority to practice under this chapter must submit an application with the appropriate fee, and any other materials required by the Board.
- B. An applicant has 90 days after being notified of any additional materials needed to complete the application to submit those materials to the Board. Failure to complete the application within that 90-day period may result in a denial of the application.
- C. Verification of current certification in CPR. For purposes of meeting the CPR certification requirements under this chapter, online trainings are not accepted, unless the applicant can verify hands-on participation with the instructor as a component of the training.
- D. Verification of passing the jurisprudence examination administered by the Board with a grade of 90 percent. Applicants who do not pass the jurisprudence examination in three attempts may be preliminarily denied licensure.

II. SPECIFIC QUALIFICATIONS FOR DENTAL HYGIENIST INITIAL LICENSURE

- A. Verification of an associate's degree or higher from a dental hygiene program accredited by CODA or its successor organization or the educational equivalent of a dental hygiene degree as determined by the Board, or of having completed at least 1/2 of the prescribed course of study in an accredited dental college as a dental student;
- B. Verification of passing the National Board Dental Hygiene Examination or the successor to that examination; and
- C. Verification of passing all sections of a Board-approved regional or state dental board dental hygiene examination.

III. SPECIFIC QUALIFICATIONS FOR INDEPENDENT PRACTICE DENTAL HYGIENIST AUTHORITY

- A. Verification of an active dental hygienist license in good standing under the *Maine Dental Practice Act*; and
- B. Verification of 2,000 hours of clinical practice experience as a licensed dental hygienist.

IV. SPECIFIC QUALIFICATIONS FOR PUBLIC HEALTH DENTAL HYGIENIST AUTHORITY

- A. Verification of an active dental hygienist license in good standing under the *Maine Dental Practice Act*;
- B. Submission of a written practice agreement between the applicant and a supervising dentist that outlines the roles and responsibilities of the collaboration, which must include:
 - (1) Supervising dentist's responsibilities, including:
 - a. Providing an appropriate level of contact, communication, collaboration, and consultation with the dental hygienist;
 - b. Having specific standing orders or policy guidelines for procedures that are to be carried out for each location or program, although the dentist need not be present when the procedures are being performed;
 - (2) Dental hygienist's responsibilities, including:
 - a. Documenting revisions to a written practice agreement in a new practice agreement and filing it with the Board within 10 days of the change. Similarly, documenting termination of a practice agreement and submitting it to the Board within 10 days of the change;
 - b. Maintaining an appropriate level of contact and communication with the Maine licensed dentist providing Public Health Supervision;
 - c. Identifying the public health dental hygiene settings under which services are to be provided;
 - d. Informing each patient who may require further dental services of that need; and
 - e. Providing to the patient, parent or guardian a written plan for referral or an agreement for follow-up, recording all conditions that should be called to the attention of a dentist.

V. SPECIFIC QUALIFICATIONS FOR DENTAL THERAPIST AUTHORITY

- A. Verification of an active dental hygienist license in good standing under the *Maine Dental Practice Act*;
- B. Verification of a master's degree in dental therapy from a program that is either CODA accredited or meets the curriculum requirements adopted by board rule;
- C. Verification of 2,000 hours of supervised clinical practice while licensed as a provisional dental therapist and under the supervision of a dentist;

For purposes of meeting the clinical requirements of this subparagraph, an applicant's hours of supervised clinical experience may be completed under the supervision of a dentist licensed in another state or a Canadian province, provided that the applicant was operating lawfully under the laws and rules of that state or province;

- D. *(Not in use)*
- E. Submission of a written practice agreement in settings limited to those enumerated in 32 M.R.S. § 18377(3) between the applicant and a supervising dentist that outlines the roles and responsibilities of the collaboration, and which must include:
 - (1) The services and procedures and the practice settings for those services and procedures that the dental therapist may provide, together with any limitations on those services and procedures;
 - (2) Any age-specific and procedure-specific practice protocols, including case selection criteria, assessment guidelines and imaging frequency;
 - (3) Procedures to be used with patients treated by the dental therapist for obtaining informed consent and for creating and maintaining dental records;
 - (4) A plan for review of patient records by the supervising dentist and the dental therapist;
 - (5) A plan for managing medical emergencies in each practice setting in which the dental therapist provides care;
 - (6) A quality assurance plan for monitoring care, including patient care review, referral follow-up, and a quality assurance chart review;
 - (7) Protocols for administering and dispensing medications, including the specific circumstances under which medications may be administered and dispensed;
 - (8) Criteria for providing care to patients with specific medical conditions or complex medical histories, including requirements for consultation prior to initiating care; and

- (9) Specific written protocols, including a plan for providing clinical resources and referrals, governing situations in which the patient requires treatment that exceeds the scope of practice or capabilities of the dental therapist.
- F. Revisions to a written practice agreement must be documented in a new practice agreement and filed with the Board within 10 days of the change. Similarly, termination of a practice agreement must be documented and submitted to the Board within 10 days of the change; and
- G. Verification of passing all sections of a clinical examination approved by the Board.

VI. SPECIFIC QUALIFICATIONS FOR PROVISIONAL DENTAL THERAPIST AUTHORITY

- A. Verification of an active dental hygienist license in good standing under the *Maine Dental Practice Act*;
- B. Verification of a master's degree in dental therapy from a program that is either CODA accredited or meets the curriculum requirements adopted by board rule;
- C. *(Not in use)*
- D. Submission of a current, written practice agreement in settings limited to those enumerated in 32 M.R.S. §18377(3) between the applicant and a supervising dentist that outlines the roles and responsibilities of the collaboration, and which must include:
 - (1) The services and procedures and the practice settings for those services and procedures that the dental therapist may provide, together with any limitations on those services and procedures;
 - (2) Any age-specific and procedure-specific practice protocols, including case selection criteria, assessment guidelines and imaging frequency;
 - (3) Procedures to be used with patients treated by the dental therapist for obtaining informed consent and for creating and maintaining dental records;
 - (4) A plan for review of patient records by the supervising dentist and the dental therapist;
 - (5) A plan for managing medical emergencies in each practice setting in which the dental therapist provides care;
 - (6) A quality assurance plan for monitoring care, including patient care review, referral follow-up and a quality assurance chart review;
 - (7) Protocols for administering and dispensing medications, including the specific circumstances under which medications may be administered and dispensed;

- (8) Criteria for providing care to patients with specific medical conditions or complex medical histories, including requirements for consultation prior to initiating care; and
 - (9) Specific written protocols, including a plan for providing clinical resources and referrals, governing situations in which the patient requires treatment that exceeds the scope of practice or capabilities of the dental therapist.
- E. Revisions to a written practice agreement must be documented in a new practice agreement and filed with the Board within 10 days of the change. Similarly, termination of a practice agreement must be documented and submitted to the Board within 10 days of the change; and
 - F. Verification of passing all sections of a clinical examination approved by the Board.

VII. SPECIFIC QUALIFICATIONS FOR THE ADMINISTRATION OF LOCAL ANESTHESIA AUTHORITY

- A. Verification of an active dental hygienist license in good standing under the *Maine Dental Practice Act*;
- B. Verification of successfully completing a local anesthesia course approved by the Board or sponsored by an institutional program accredited by CODA. The coursework must include didactic and clinical experience in the administration of block and infiltration anesthesia; and
- C. Verification of passing an examination in the administration of local anesthesia. The examination may be part of the local anesthesia course approved by the Board, or an examination administered by a third party approved by the Board.

VIII. SPECIFIC QUALIFICATIONS FOR THE ADMINISTRATION OF NITROUS OXIDE ANALGESIA AUTHORITY

- A. Verification of an active dental hygienist license in good standing under the *Maine Dental Practice Act*;
- B. Verification of successfully completing a nitrous oxide analgesia course approved by the Board or sponsored by an institutional program accredited by CODA. The coursework must include didactic and clinical experience; and
- C. Verification of passing an examination in the administration of nitrous oxide analgesia. The examination may be part of the nitrous oxide analgesia course approved by the Board, or an examination administered by a third party approved by the Board.

IX. SPECIFIC QUALIFICATIONS FOR FACULTY LICENSURE

- A. Verification of an active dental hygiene license in good standing issued under the laws of another jurisdiction;

- B. Credentials, satisfactory to the Board, including:
- (1) A letter from the employing school of dentistry, dental hygiene or denturism indicating that the applicant satisfies the credentialing standards of the school and that the applicant will teach dental hygiene in this State as part of a clinical and didactic program for professional education for dental hygiene students and dental hygiene residents accredited by CODA or a successor organization approved by the Board; and
 - (2) Previous employment experience relevant to the subject to be taught (including dates of employment).

X. SPECIFIC QUALIFICATIONS FOR TEMPORARY LICENSURE PURSUANT TO 10 M.R.S. §8003(5)(G)

- A Verification of an active dental hygiene license in good standing issued under the laws of another state and payment of applicable fees.
- B. The Board may waive the CPR and jurisprudence examination requirements set forth in Chapter 2(I)(C) and (D) for good cause.
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STATUTORY AUTHORITY:

32 M.R.S. §§ 18324, 18341, 18345; 10 M.R.S. §8003(5)(G); P.L. 2021 ch. 44 (Emergency, effective May 5, 2021; and P.L. 2021 ch. 163 (Emergency, effective June 11, 2021)

EFFECTIVE DATE:

April 5, 2020 – filing 2020-067

AMENDED:

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